

1637



PTO/SB/17 (05-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 0.00)**Complete if Known**

Application Number	09/726,643-Conf. #2092
Filing Date	December 1, 2000
First Named Inventor	Steven M. Ruben
Examiner Name	A. Spiegler
Art Unit	1637
Attorney Docket No.	PZ040P1

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account

Deposit Account Number **08-3425**

Deposit Account Name **Human Genome Sciences, Inc.**

The Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify)			

SUBTOTAL (1) (\$ 0.00)**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	-20** =	x	=	Fee Paid
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Independent Claims	-3** =	<input type="text"/>	<input type="text"/>	<input type="text"/>
Multiple Dependent		<input type="text"/>	<input type="text"/>	<input type="text"/>

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

** or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Janet M. Martineau	Registration No. (Attorney/Agent)	46,903	Telephone (301) 315-2723
Signature		Date	August 27, 2003	



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Ruben et al.

Group Art Unit: 1637

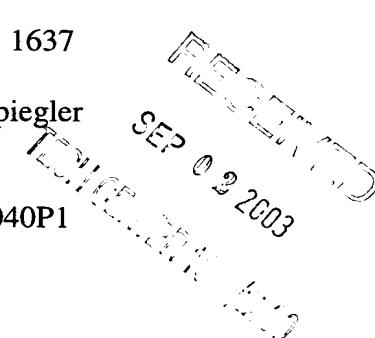
Application No.: 09/726,643

Examiner: A. Spiegler

Filed: December 1, 2000

Docket No. PZ040P1

For: 26 Human Secreted Proteins



RESPONSE UNDER 37 C.F.R. § 1.111

Commissioner for Patents
Alexandria, VA 22313

Sir:

In response to the Office Action mailed May 28, 2003, Applicants hereby request that the following remarks be entered into the above-captioned application. Applicants submit concurrently herewith: (a) a Fee Transmittal Sheet (in duplicate); and (b) Exhibit A (nucleic acid sequence analysis of clone HYACJ27), and (c) an executed declaration by Dr. George Komatsoulis under 37 C.F.R. §1.132.

The list of pending claims starts on page 2.

The remarks start on page 12.